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|--|--|--------------------------|-------------------------------------|
| <b>Effective on 12/06/2004.</b><br><b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b><br><h1 style="text-align: center;">FEE TRANSMITTAL</h1> <h2 style="text-align: center;">For FY 2008</h2> |  | <b>Complete if Known</b> |                                     |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |  | Application Number       | 10/774,681-Conf. #9429              |
|  |  | Filing Date              | February 8, 2004                    |
|  |  | First Named Inventor     | Michael Ehrlich                     |
|  |  | Examiner Name            | L. A. Clow                          |
|  |  | Art Unit                 | 1631                                |
| <b>TOTAL AMOUNT OF PAYMENT</b>   |  | (\$ ) 930.00             | Attorney Docket No. E0444.70000US01 |

|  |   |  |                               |
|--|---|--|-------------------------------|
| <b>METHOD OF PAYMENT (check all that apply)</b>  |   |  |                               |
| <input type="checkbox"/> Check   | <input checked="" type="checkbox"/> Credit Card | <input type="checkbox"/> Money Order   | <input type="checkbox"/> None |
| Other (please identify): _____   |   |  |                               |
| <input type="checkbox"/> Deposit Account   | Deposit Account Number: 23/2825                 | Deposit Account Name: Wolf, Greenfield & Sacks, P.C.                                     |                               |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                 |   |  |                               |
| <input type="checkbox"/> Charge fee(s) indicated below   |   | <input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b> |                               |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 |   | <input checked="" type="checkbox"/> Credit any overpayments                              |                               |

|   |                     |   |                    |                     |                         |                      |                       |
|---|---------------------|---|--------------------|---------------------|-------------------------|----------------------|-----------------------|
| <b>FEE CALCULATION</b>  |                     |   |                    |                     |                         |                      |                       |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                     |   |                    |                     |                         |                      |                       |
|   | <b>FILING FEES</b>  |   | <b>SEARCH FEES</b> |                     | <b>EXAMINATION FEES</b> |                      |                       |
|   |                     | <b>Small Entity</b>                                     |                    | <b>Small Entity</b> |                         | <b>Small Entity</b>  |                       |
| <b>Application Type</b>   | <b>Fee (\$)</b>     | <b>Fee (\$)</b>   | <b>Fee (\$)</b>    | <b>Fee (\$)</b>     | <b>Fee (\$)</b>         | <b>Fee (\$)</b>      | <b>Fees Paid (\$)</b> |
| Utility   | 310                 | 155   | 510                | 255                 | 210                     | 105                  |                       |
| Design  | 210                 | 105   | 100                | 50                  | 130                     | 65                   |                       |
| Plant   | 210                 | 105   | 310                | 155                 | 160                     | 80                   |                       |
| Reissue   | 310                 | 155   | 510                | 255                 | 620                     | 310                  |                       |
| Provisional   | 210                 | 105   | 0                  | 0                   | 0                       | 0                    |                       |
|   |                     |   |                    |                     |                         |                      |                       |
| <b>2. EXCESS CLAIM FEES</b>   |                     |   |                    |                     |                         |                      |                       |
|   |                     |   |                    |                     |                         |                      | <b>Small Entity</b>   |
| <b>Fee Description</b>  |                     |   |                    |                     |                         |                      | <b>Fee (\$)</b>       |
| Each claim over 20 (including Reissues)   |                     |   |                    |                     |                         |                      | 50                    |
| Each independent claim over 3 (including Reissues)  |                     |   |                    |                     |                         |                      | 210                   |
| Multiple dependent claims   |                     |   |                    |                     |                         |                      | 370                   |
| <b>Total Claims</b>   |                     |   |                    |                     |                         |                      |                       |
| <b>Extra Claims</b>   |                     |   |                    |                     |                         |                      |                       |
| <b>Fee (\$)</b>   |                     |   |                    |                     |                         |                      |                       |
| <b>Fee Paid (\$)</b>  |                     |   |                    |                     |                         |                      |                       |
| <b>Multiple Dependent Claims</b>  |                     |   |                    |                     |                         |                      |                       |
| <b>Fee (\$)</b>   |                     |   |                    |                     |                         |                      |                       |
| <b>Fee Paid (\$)</b>  |                     |   |                    |                     |                         |                      |                       |
| <b>Indep. Claims</b>  |                     |   |                    |                     |                         |                      |                       |
| <b>Extra Claims</b>   |                     |   |                    |                     |                         |                      |                       |
| <b>Fee (\$)</b>   |                     |   |                    |                     |                         |                      |                       |
| <b>Fee Paid (\$)</b>  |                     |   |                    |                     |                         |                      |                       |
| <b>3. APPLICATION SIZE FEE</b>  |                     |   |                    |                     |                         |                      |                       |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |   |                    |                     |                         |                      |                       |
| <b>Total Sheets</b>   | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> |                    |                     | <b>Fee (\$)</b>         | <b>Fee Paid (\$)</b> |                       |
| - 100 =   | /50 =               | (round up to a whole number) x                          |                    |                     | =                       |                      |                       |
| <b>4. OTHER FEE(S)</b>  |                     |   |                    |                     |                         |                      |                       |
| Non-English Specification. \$130 fee (no small entity discount)   |                     |   |                    |                     |                         |                      |                       |
| Other (e.g., late filing surcharge): 2253 Extension for response within third month   |                     |   |                    |                     |                         |                      | 525.00                |
| 2801 Request for continued examination (RCE) (see 37 ...  |                     |   |                    |                     |                         |                      | 405.00                |

|                     |                       |                                   |               |
|---------------------|-----------------------|-----------------------------------|---------------|
| <b>SUBMITTED BY</b> |                       |                                   |               |
| Signature           | /Patrick R.H. Waller/ | Registration No. (Attorney/Agent) | 41,418        |
| Telephone           | 617.646.8000          |                                   |               |
| Name (Print/Type)   | Patrick R.H. Waller   | Date                              | July 28, 2008 |

|  |                                       |
|--|---------------------------------------|
| <b>Certificate of Electronic Filing Under 37 CFR 1.8</b>   |                                       |
| I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4). |                                       |
| Dated: July 28, 2008   | Signature: _____/Trish McDonald/_____ |